ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	m G		1/19/99
O.I.P.E. CLASSIFIER		I.J	1/7/1
FORMALITY REVIEW		6477	2-3-99

INDEX OF CLAIMS

✓	.... Rejected		N	.... Non-elected		
=	.... Allowed		I	.... Interference		
—	(Through numeral)... Canceled		A	.... Appeal		
÷	.... Restricted		O	.... Objected		

Claim Final	Original	Date							Claim Final	Original	Date							Claim Final	Original	Date						
	1	✓								51										101							
	2	✓								52										102							
	3	✓								53										103							
	4	✓								54										104							
	5	✓								55										105							
	6	✓								56										106							
	7	✓								57										107							
	8	✓								58										108							
	9	✓								59										109							
	10	✓								60										110							
	11	✓								61										111							
	12	✓								62										112							
	13	✓								63										113							
	14	✓								64										114							
	15	✓	✓	✓	✓	✓				65										115							
	16	✓	✓	✓	✓	✓				66										116							
	17	✓	✓	✓		✓				67										117							
	18	✓	✓	✓	✓	✓				68										118							
	19	✓	✓	✓	✓	✓				69										119							
	20	✓	✓	✓	✓	✓				70										120							
	21			✓		✓				71										121							
	22			✓	✓	✓				72										122							
	23			✓	✓	✓				73										123							
	24			✓	✓	✓				74										124							
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	48									98										148							
	49									99										149							
	50									100										150							

If more than 150 claims or 10 actions
staple additional sheet here

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